September 6, 1988

12-79

1443

FIRST ATLANTIC LAND CO., INC.
152 MAINE STREET, SUITE 2
YARMINGDALE, ME 04345

RE: Subsurface Wastewater Disposal System Application

DEAR SIRS:

Enclosed you will find five sets of the Subsurface Wastewater Disposal System Application and Design Form (HHE 200). Please review these forms carefully and sign each application where designated.

You will then need to take three sets to the Local Plumbing Inspector for his review and approval. The Local Plumbing Inspector will forward one set to the Department of Human Services, Division of Health Engineering. He will retain one set and will return to you one set, which will be the permit.

If you should have any further questions as to the design, maintenance or construction of the system, please do not hesitate to call.

Sincerely,

Vaughn L. Smith
Licensed Site Evaluator #226

Town Copy

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207)289-3826

PROPERTY ADDRESS

Town Or Plantation	AUGUSTA
Street Subdivision Lot #	ROUTE 105 LOT #7

PROPERTY OWNERS NAME

FIRST ATLANTIC LAND COMPANY, INC.

Last: First:

Applicant Name:	SAME
Mailing Address of Owner/Applicant (If Different)	152 MAIN AVENUE, SUITE 2 FARMINGDALE, ME 04345

AUGUSTA PERMIT # 1,443 TOWN COPY

Date Permit Issued 10 3 88

$ 140.00 FEE ☐ If Double Fee Charged

Local Plumbing Inspector Signature Gary R. Fuller L.P.I. # 1856

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector to deny a Permit.

Robert E Bellow

Signature of Owner/Applicant — Date

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules.

Local Plumbing Inspector Signature — Date Approved

PERMIT INFORMATION

THIS APPLICATION IS FOR:
1. ☒ NEW SYSTEM
2. ☐ REPLACEMENT SYSTEM
3. ☐ EXPANDED SYSTEM
4. ☐ EXPERIMENTAL SYSTEM

SEASONAL CONVERSION
to be completed by the LPI
5. ☐ SYSTEM COMPLIES WITH RULES
6. ☐ CONNECTED TO SANITARY SEWER
7. ☐ SYSTEM INSTALLED – P# _____
8. ☐ SYSTEM DESIGN RECORDED AND ATTACHED

IF REPLACEMENT SYSTEM:
YEAR FAILING SYSTEM INSTALLED _____
THE FAILING SYSTEM IS:
1. ☐ BED 3. ☐ TRENCH
2. ☐ CHAMBER 4. ☐ OTHER: _____

SIZE OF PROPERTY: 19.1 Ac.

ZONING:

THIS APPLICATION REQUIRES:
1. ☒ NO RULE VARIANCE
2. ☐ NEW SYSTEM VARIANCE Attach New System Variance Form
3. ☐ REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form
   a. ☐ Requires Local Plumbing Inspector Approval
   b. ☐ Requires State and Local Plumbing Inspector Approval
4. ☐ MINIMUM LOT SIZE VARIANCE

DISPOSAL SYSTEM TO SERVE:
1. ☒ SINGLE FAMILY DWELLING
2. ☐ MODULAR OR MOBILE HOME
3. ☐ MULTIPLE FAMILY DWELLING
4. ☐ OTHER _____ SPECIFY

INSTALLATION IS:
COMPLETE SYSTEM
1. ☒ NON-ENGINEERED SYSTEM
2. ☐ PRIMITIVE SYSTEM (Includes Alternative Toilet)
3. ☐ ENGINEERED (+2000 gpd)

INDIVIDUALLY INSTALLED COMPONENTS:
4. ☐ TREATMENT TANK (ONLY)
5. ☐ HOLDING TANK _____ GAL
6. ☐ ALTERNATIVE TOILET (ONLY)
7. ☐ NON-ENGINEERED DISPOSAL AREA (ONLY)
8. ☐ ENGINEERED DISPOSAL AREA (ONLY)
9. ☐ SEPARATED LAUNDRY SYSTEM

TYPE OF WATER SUPPLY: DRILLED WELL-PROPOSED

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK
1. ☒ SEPTIC: ☒ Regular ☐ Low Profile
2. ☐ AEROBIC

SIZE: 1000 GALS.

WATER CONSERVATION
1. ☒ NONE
2. ☐ LOW VOLUME TOILET
3. ☐ SEPARATED LAUNDRY SYSTEM
4. ☐ ALTERNATIVE TOILET

SPECIFY: _____

PUMPING
1. ☒ NOT REQUIRED
2. ☐ MAY BE REQUIRED (DEPENDING ON TREATMENT TANK LOCATION AND ELEVATION)
3. ☐ REQUIRED

DOSE: _____ GALS.

CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)
3 BEDROOMS

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
3	C

DEPTH TO LIMITING FACTOR: 18

SIZE RATINGS USED FOR DESIGN PURPOSES
1. ☐ SMALL
2. ☐ MEDIUM
3. ☒ MEDIUM-LARGE
4. ☐ LARGE
5. ☐ EXTRA LARGE

DISPOSAL AREA TYPE/SIZE
1. ☒ BED 900 Sq. Ft.
2. ☐ CHAMBER _____ Sq. Ft.
   ☐ REGULAR ☐ H-20
3. ☐ TRENCH _____ Linear Ft.
4. ☐ OTHER: _____

DESIGN FLOW: 270 (GALLONS/DAY)

SITE EVALUATOR STATEMENT

On 8-17-88 (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

Vaugh L. Smith — Site Evaluator Signature

226 — SE#

9-7-88 — Date

(Local Plumbing Inspector's Signature if permit is for Seasonal Conversion.)

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

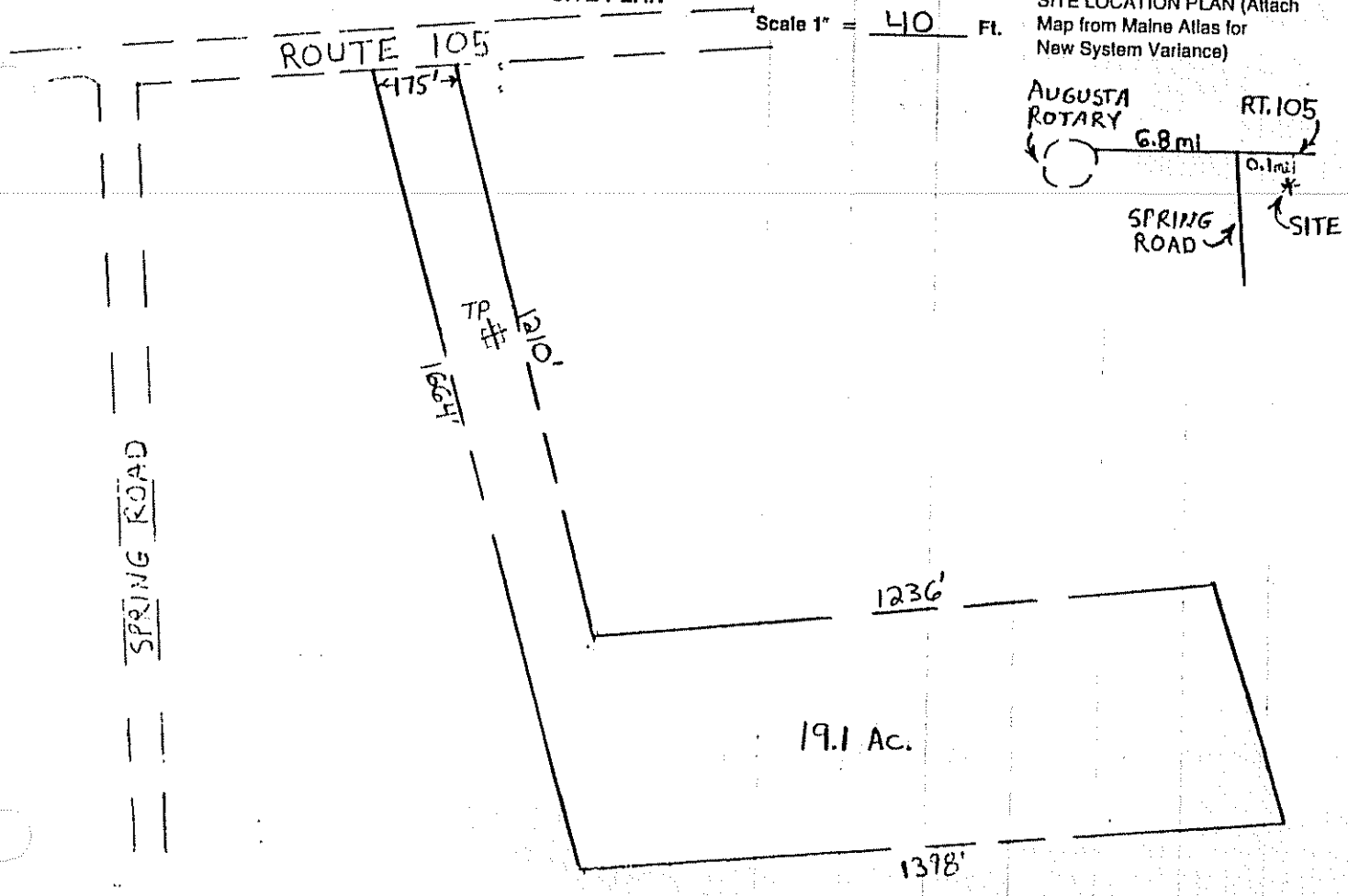
Town, City, Plantation: AUGUSTA

Street, Road, Subdivision: RT. 105, LOT #7 SPRING HILL SUB.

Owners Name: 1ST ATLANTIC LAND CO.

SITE PLAN

Scale 1" = 40 Ft.



SITE LOCATION PLAN (Attach Map from Maine Atlas for New System Variance)

SOIL DESCRIPTION AND CLASSIFICATION (Location of Observation Holes Shown Above)

Observation Hole #1 ☒ Test Pit ☐ Boring

3 " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

	Texture	Consistency	Color	Mottling
0–6			YELLOWISH BROWN	NONE
6–10	STONY FINE SANDY LOAM	FRIABLE		
10–15				
15–20		FIRM	LIGHT OLIVE BROWN	FEW FAINT
20–30				
30–40				
40–50				

Soil Profile	Classification Condition	Slope	Limiting Factor	
3	C	9 %	18	☐ Ground Water ☑ Restrictive Layer ☐ Bedrock

Observation Hole _____ ☐ Test Pit ☐ Boring

_____ " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

	Texture	Consistency	Color	Mottling
0–6				
6–10				
10–15				
15–20				
20–30				
30–40				
40–50				

Soil Profile	Classification Condition	Slope	Limiting Factor	
		%		☐ Ground Water ☐ Restrictive Layer ☐ Bedrock

Vaughn L. Smith
Site Evaluator Signature

226
SE#

9-7-88
Date

HHE-200 Rev. 1/84

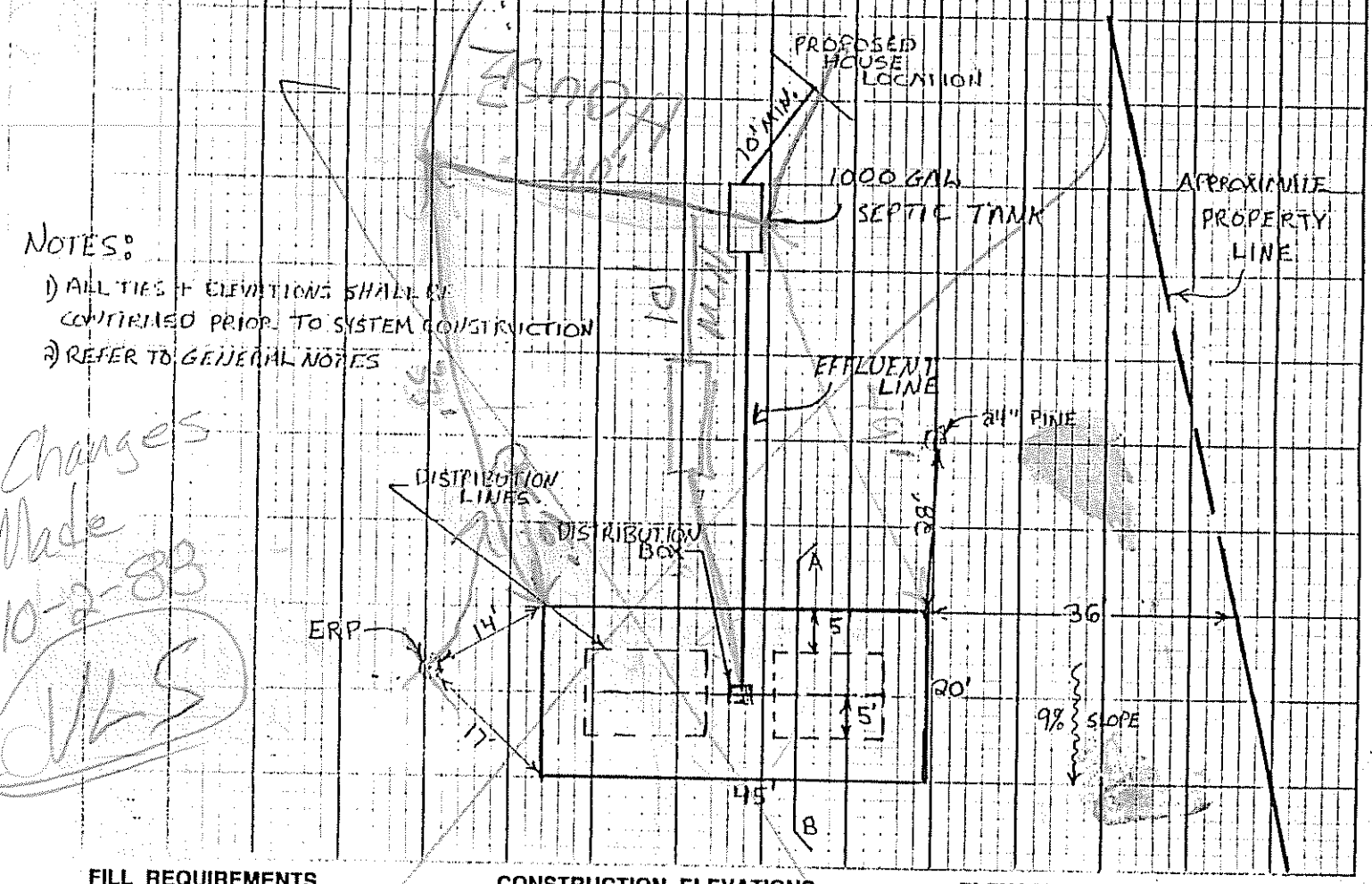
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

City, Plantation: AUGUSTA
Street, Road, Subdivision: ROUTE 105, LOT #5 SPRING HILL SUB.
Owners Name: 1ST ATLANTIC LAND CO.

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 Ft.



NOTES:
1) ALL TIES + ELEVATIONS SHALL BE CONFIRMED PRIOR TO SYSTEM CONSTRUCTION
2) REFER TO GENERAL NOTES

Changes Made 10-2-88 WLS

FILL REQUIREMENTS

Depth of Fill (Upslope): 18"
Depth of Fill (Downslope): 41"
FILL DEPTH MAY VARY DUE TO UNEVEN GROUND CONTOURS

CONSTRUCTION ELEVATIONS

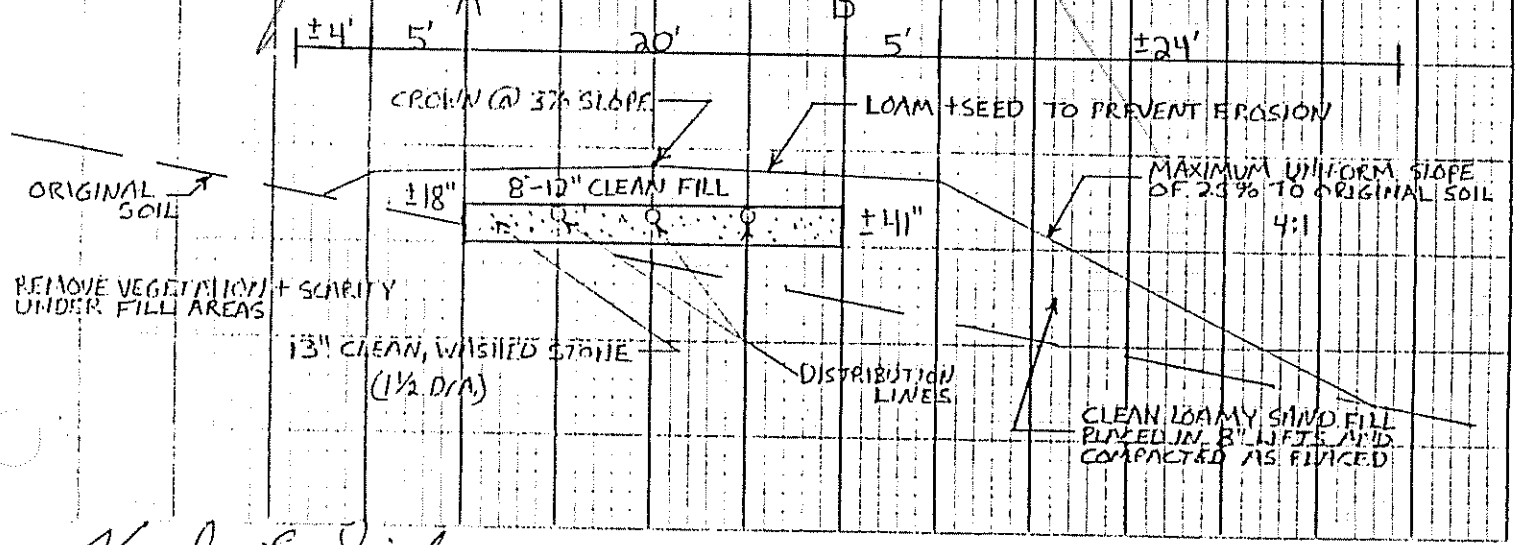
Reference Elevation Is: 0"
Bottom of Disposal Area: -39"
Top of Distribution Lines ~~or Chambers~~: -21"

ELEVATION REFERENCE POINT LOCATION & DESCRIPTION

ERP= 14" PINE WITH NAIL SET 51" ABOVE GROUND

DISPOSAL AREA CROSS SECTION

Scale:
Vertical: 1 Inch = 5 Ft.
Horizontal: 1 Inch = 10 Ft.



Vera P. E. Smith
Site Evaluator Signature

226
SE#

9-7-88
Date

HHE-200 Rev. 1/84

GENERAL NOTES

1) The most recent revision of the Maine State Plumbing Code is hereby made a part of this HHE-200 Form and shall be consulted by the disposal system installer for further construction details, material specifications, cautions and other related details pertinent to the installation of this disposal system.

2) This HHE-200 Form is intended to represent facts pertinent to the Plumbing Code only. The owner or applicant must check both local and state ordinances regarding other building regulations (ie. zoning, building codes, minimum lot size, etc.) before considering this an approvable site. All information shown on this form relating to property lines and subsurface structures (such as, but not limited to: water lines, septic tanks, cess pools, cellar drains, utility lines, etc.) are noted, plotted, or left off as not affecting the system based on information provided by the owner or his agent. It is the responsibility of the owner or his agent to confirm, BEFORE CONSTRUCTION BEGINS, the above and/or any other features which may affect (or be adversely affected by) the installation of this system.

3) When a gravity system is proposed, BEFORE CONSTRUCTION BEGINS, the disposal system installer and building contractor shall review the relative elevation of all points given in this HHE-200 Form and the elevation of the existing or proposed building drain and septic tank openings for compatability to the minimum code pitch requirements. Any questions that arise should be directed to the local plumbing inspector or myself. When a pump system is installed, provisions shall be made to keep the tank and lift station outlets above the high water table. An alarm device warning of pump failure should be considered. At present, venting of pumped systems is optional.

4) If the use of a laundry machine becomes excessive, a separate laundry bed should be designed and installed. A lint catching device should be installed for the washing machine (if it doesn't have one) and cleared frequently. A distribution box has been shown in the design and is intended to offer an inspection port whereby the owner can check for excessive lint or grease build-up before damage to the system is done. Inspection should be frequent. Installation of a garbage grinder is not recommended.

5) The actual water flow or number of bedrooms shall not extend the design criteria indicated on this HHE-200 Form without a re-evaluation of the system.

6) Construction Details (State Plumbing Code Section 11.D)
   (A) The vegetation in the proposed disposal area and fill extensions shall be removed and the ground surface scarified to minimize glazing of the original soil.
   (B) The bottom of the disposal area and distribution line shall be level with a maximum grade tolerance of 1 inch per 100 feet.
   (C) Fill shall be free of foreign material, placed in 8 inch lifts and compacted as placed.
   (D) The finish grade of the backfill over the disposal area shall be crowned from the center of the disposal area at a 3% slope and extend 3 feet beyond the edge of the disposal area. At that point, the fill shall be sloped at a uniform grade of no greater than 25% (4:1) to the original ground.
   (E) The land adjacent to the disposal area shall be graded to prevent both the accumulation of surface water on the disposal area and the flow of surface water across the disposal area.
   (F) The finished disposal area and fill extensions shall be seeded to prevent erosion.
      a) Grass, clover, trefoil, vetch, perennial wildflowers, or other herbaceous perennials may be utilized for disposal area surfaces. Woody shrubs are unacceptable.
      b) Woody shrubs in conjunction with a hardy perennial ground clover, may be used on fill extensions only.

7) The general setback distance between a well and disposal system serving a single family residence is 100 feet. The location of a new well that is within 100 feet of the proposed system may void this design.

8) All construction shall be inspected by the local plumbing inspector (L.P.I.) prior to backfilling.

9) If the owner or installer has any question, please do not hesitate to call.

SW-GEN/NOTE

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207)289-3826

PROPERTY ADDRESS

Town Or Plantation	AUGUSTA
Street Subdivision Lot #	ROUTE 105 LOT #7

PROPERTY OWNERS NAME

FIRST ATLANTIC LAND COMPANY, INC.

Last: First:

Applicant Name:	SAME
Mailing Address of Owner/Applicant (If Different)	152 MAIN AVENUE, SUITE 2 FARMINGDALE, ME 04345

Caution: Permit Required

The Subsurface Wastewater Disposal System shall not be installed until a Permit is attached here by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the disposal system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.

Owner/Applicant Statement

I certify that the Information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector to deny a Permit.

Signature of Owner/Applicant — Date

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules.

Local Plumbing Inspector Signature — Date Approved: 4/27/88

PERMIT INFORMATION

THIS APPLICATION IS FOR:
1. ☒ NEW SYSTEM
2. ☐ REPLACEMENT SYSTEM
3. ☐ EXPANDED SYSTEM
4. ☐ EXPERIMENTAL SYSTEM

SEASONAL CONVERSION
to be completed by the LPI
5. ☐ SYSTEM COMPLIES WITH RULES
6. ☐ CONNECTED TO SANITARY SEWER
7. ☐ SYSTEM INSTALLED – P# _____
8. ☐ SYSTEM DESIGN RECORDED AND ATTACHED

IF REPLACEMENT SYSTEM:
YEAR FAILING SYSTEM INSTALLED _____
THE FAILING SYSTEM IS:
1. ☐ BED 3. ☐ TRENCH
2. ☐ CHAMBER 4. ☐ OTHER: _____

THIS APPLICATION REQUIRES:
1. ☒ NO RULE VARIANCE
2. ☐ NEW SYSTEM VARIANCE Attach New System Variance Form
3. ☐ REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form
a. ☐ Requiring Local Plumbing Inspector Approval
b. ☐ Requires State and Local Plumbing Inspector Approval
4. ☐ MINIMUM LOT SIZE VARIANCE

DISPOSAL SYSTEM TO SERVE:
1. ☒ SINGLE FAMILY DWELLING
2. ☐ MODULAR OR MOBILE HOME
3. ☐ MULTIPLE FAMILY DWELLING
4. ☐ OTHER _____ SPECIFY

INSTALLATION IS:
COMPLETE SYSTEM
1. ☒ NON-ENGINEERED SYSTEM
2. ☐ PRIMITIVE SYSTEM (Includes Alternative Toilet)
3. ☐ ENGINEERED (+2000 gpd)

INDIVIDUALLY INSTALLED COMPONENTS:
4. ☐ TREATMENT TANK (ONLY)
5. ☐ HOLDING TANK _____ GAL
6. ☐ ALTERNATIVE TOILET (ONLY)
7. ☐ NON-ENGINEERED DISPOSAL AREA (ONLY)
8. ☐ ENGINEERED DISPOSAL AREA (ONLY)
9. ☐ SEPARATED LAUNDRY SYSTEM

SIZE OF PROPERTY	ZONING	TYPE OF WATER SUPPLY
19.1 Ac.		DRILLED WELL-PROPOSED

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK
1. ☒ SEPTIC: ☒ Regular ☐ Low Profile
2. ☐ AEROBIC

SIZE: 1000 GALS.

WATER CONSERVATION
1. ☒ NONE
2. ☐ LOW VOLUME TOILET
3. ☐ SEPARATED LAUNDRY SYSTEM
4. ☐ ALTERNATIVE TOILET

SPECIFY: _____

PUMPING
1. ☒ NOT REQUIRED
2. ☐ MAY BE REQUIRED (DEPENDING ON TREATMENT TANK LOCATION AND ELEVATION)
3. ☐ REQUIRED

DOSE: _____ GALS.

CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)
3 BEDROOMS

DESIGN FLOW: 270 (GALLONS/DAY)

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
3	C

DEPTH TO LIMITING FACTOR: 18".

SIZE RATINGS USED FOR DESIGN PURPOSES
1. ☐ SMALL
2. ☐ MEDIUM
3. ☒ MEDIUM-LARGE
4. ☐ LARGE
5. ☐ EXTRA LARGE

DISPOSAL AREA TYPE/SIZE
1. ☒ BED 900 Sq. Ft.
2. ☐ CHAMBER _____ Sq. Ft.
☐ REGULAR ☐ H-20
3. ☐ TRENCH _____ Linear Ft.
4. ☐ OTHER: _____

SITE EVALUATOR STATEMENT

On 8-17-88 (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

Vaughn L. Smith — Site Evaluator Signature
226 — SE#
9-7-88 — Date

(Local Plumbing Inspector's Signature if permit is for Seasonal Conversion.)

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

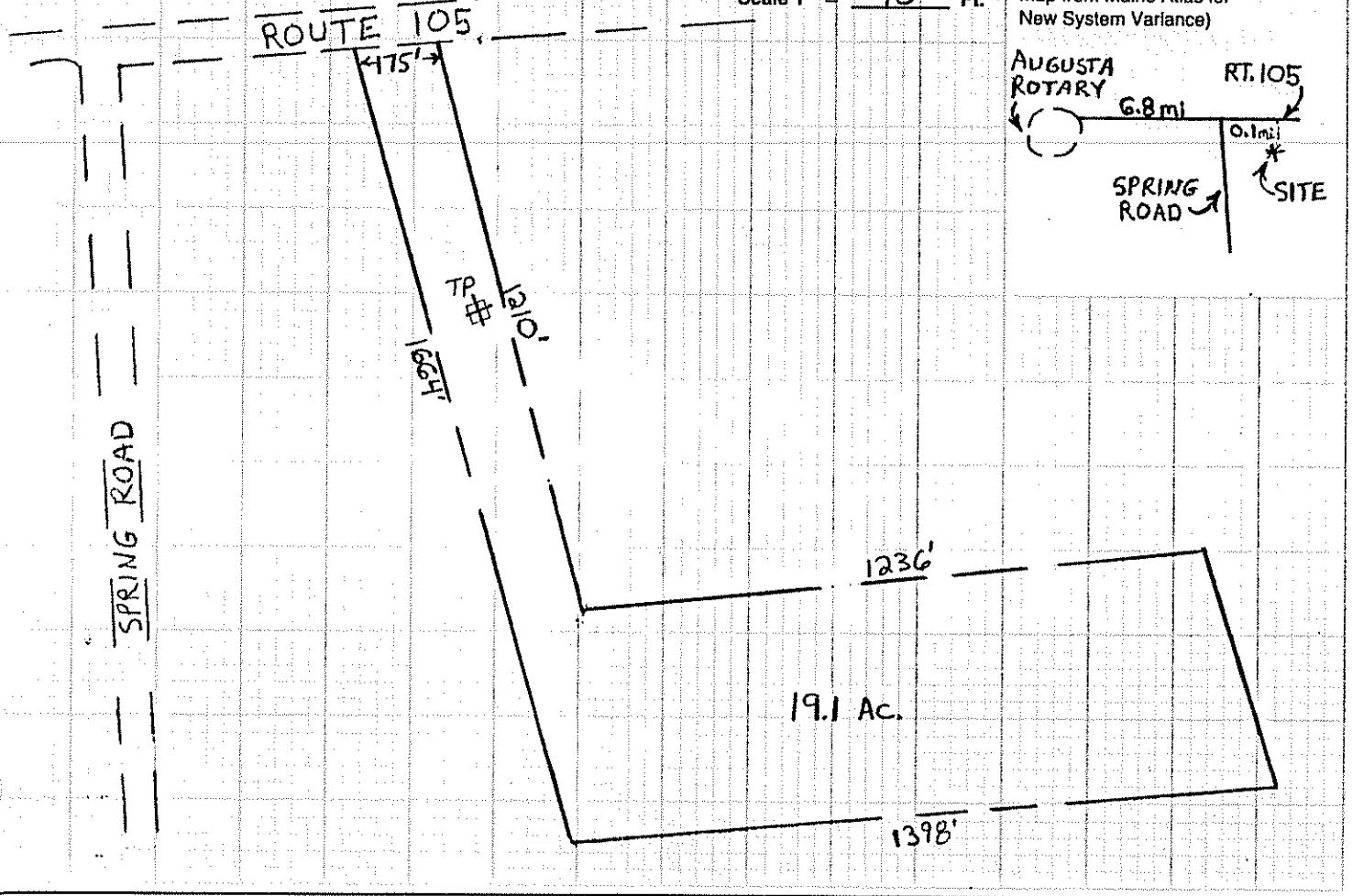
Town, City, Plantation: AUGUSTA

Street, Road, Subdivision: RT. 105, LOT #7 SPRING HILL SUB.

Owners Name: 1ST ATLANTIC LAND CO.

SITE PLAN

Scale 1" = 40 Ft.



SITE LOCATION PLAN (Attach Map from Maine Atlas for New System Variance)

SOIL DESCRIPTION AND CLASSIFICATION (Location of Observation Holes Shown Above)

Observation Hole #1 ☒ Test Pit ☐ Boring

3 " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

	Texture	Consistency	Color	Mottling
0–6	STONY FINE SANDY LOAM	FRIABLE	YELLOWISH BROWN	NONE
6–10				
10–15				
15–20		FIRM	LIGHT OLIVE BROWN	FEW FAINT
20–30				
30–40				
40–50				

Soil Profile	Classification Condition	Slope	Limiting Factor	
3	C	9 %	18	☐ Ground Water ☒ Restrictive Layer ☐ Bedrock

Observation Hole _____ ☐ Test Pit ☐ Boring

_____ " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

	Texture	Consistency	Color	Mottling
0–6				
6–10				
10–15				
15–20				
20–30				
30–40				
40–50				

Soil Profile	Classification Condition	Slope	Limiting Factor	
		%		☐ Ground Water ☐ Restrictive Layer ☐ Bedrock

Vaughn L. Smith
Site Evaluator Signature

226
SE#

9-7-88
Date

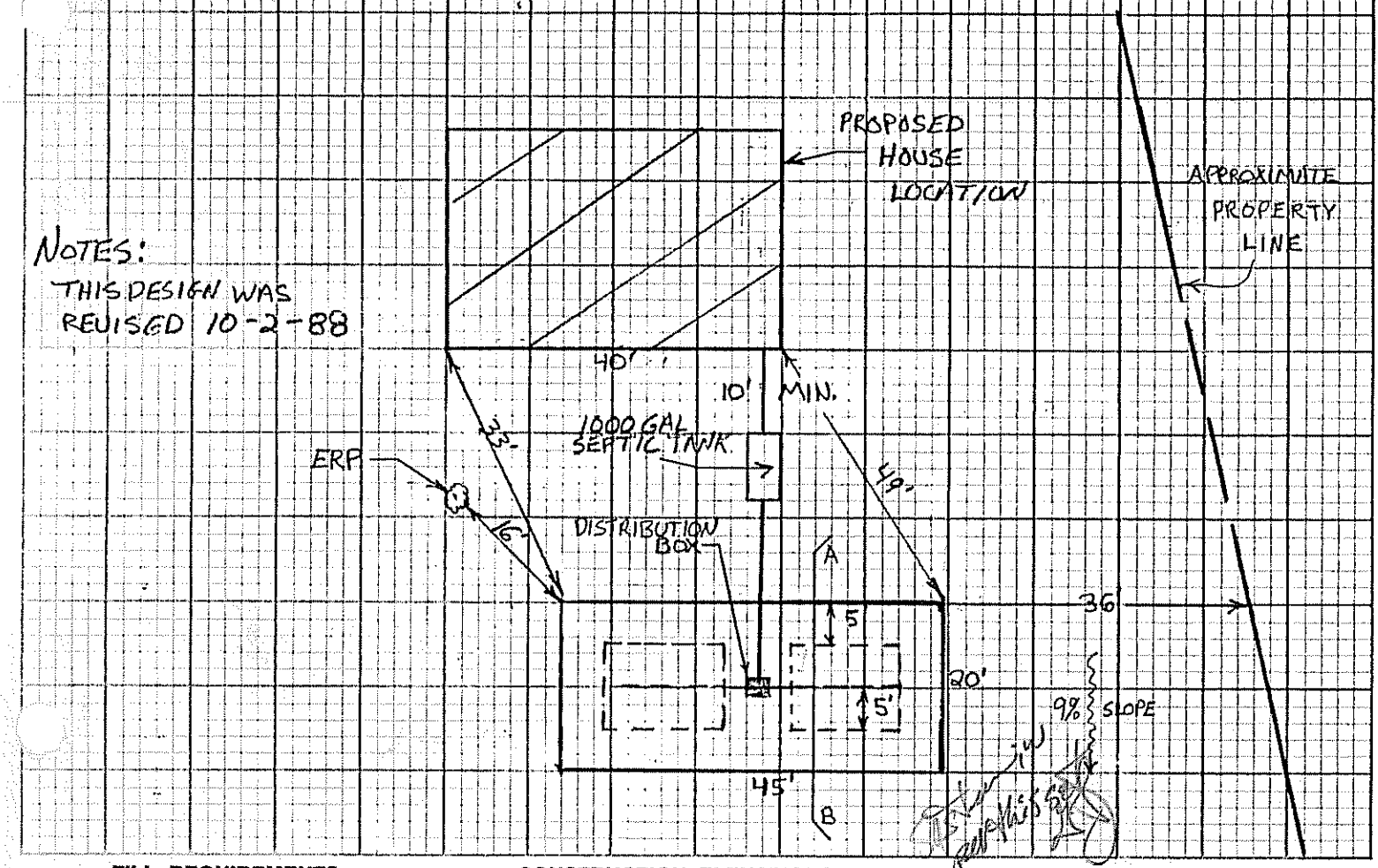
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation	Street, Road, Subdivision	Owners Name
AUGUSTA	ROUTE 105, LOT #5 SPRING HILL SUB	1ST ATLANTIC LAND CO.

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 Ft.



NOTES:
THIS DESIGN WAS REVISED 10-2-88

FILL REQUIREMENTS

Depth of Fill (Upslope): 18"
Depth of Fill (Downslope): 41"
FILL DEPTH MAY VARY DUE TO UNEVEN GROUND CONTOURS

CONSTRUCTION ELEVATIONS

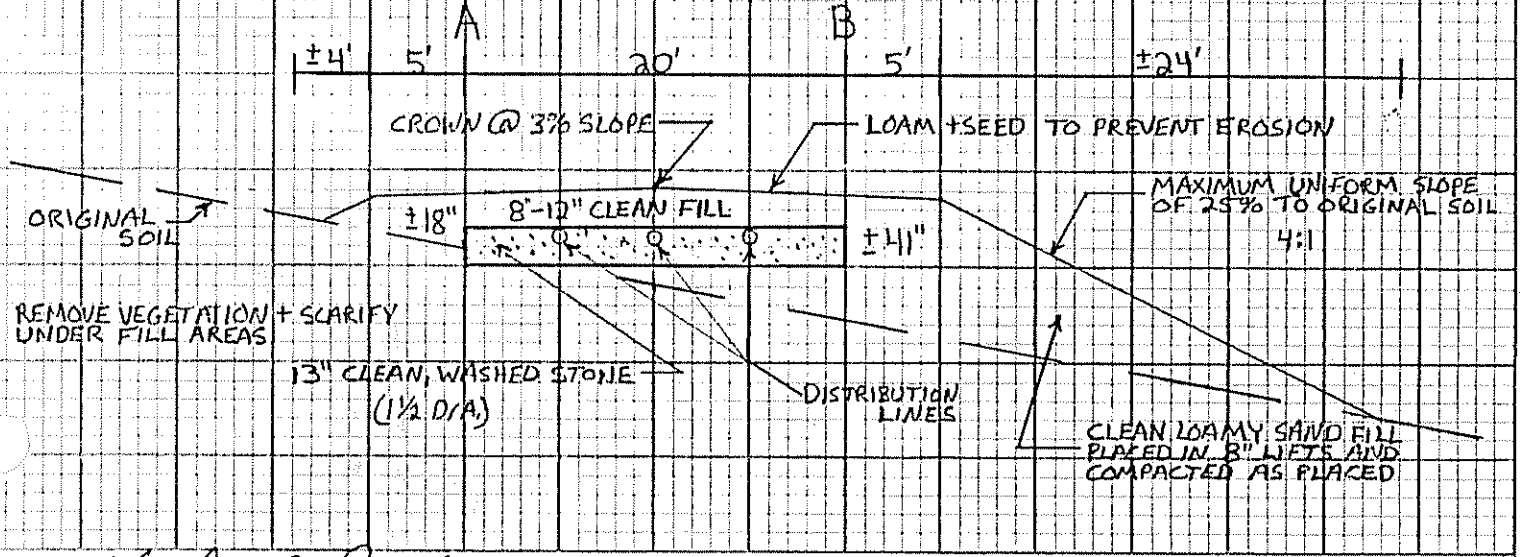
Reference Elevation is	0"
Bottom of Disposal Area	-39"
Top of Distribution Lines ~~or Chambers~~	-27"

ELEVATION REFERENCE POINT LOCATION & DESCRIPTION

ERP = 14" PINE WITH NAIL SET 54" ABOVE GROUND

DISPOSAL AREA CROSS SECTION

Scale:
Vertical: 1 Inch = 5 Ft.
Horizontal: 1 Inch = 10 Ft.



Vaughn L. Smith
Site Evaluator Signature

226
SE#

9-7-88
Date

HHE-200 Rev. 1/84